

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

**Application or Docket Number** 

09/517541

		S FILED -		CHALL CALLEY								
<u>(</u>	OR .		(C	(Column 1) (Column 2)				MALL TYPE	ENTITY	OR	OTHER THAN OR SMALL ENTITY	
-	· · ·		NUMbr	ER FILED	NUMBER		F	RATE	FEE	7	RATE	FEE
	ASIC FEE				**	*,		1	345.00	OR		690.00
	OTAL CLAIMS		8	minus 2	20= *		Х	(\$ 9=		OR		
	DEPENDENT CL		2	minus	3 = *		X	(39=	<del>                                     </del>	OR OR	\	<del> </del>
MU	ULTIPLE DEPEN	IDENT (	CLAIM PI	RESENT					+			<del>  </del>
* If	i the difference	∍ in colu	ımn 1 is	less than z	ero, enter "0" in c	column 2	<u> </u>	130=	200	OR	L	<u> </u>
					D - PART II		IC	OTAL	345	OR		
<b></b>	Two controls	(Colu	umn 1)		(Column 2)	(Column 3)	SN	/ALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		REMA	AIMS IAINING FTER NDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R,	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
END	Total	*		Minus	**	=	X	\$ 9=		OR	X\$18=	
AM	Independent FIRST PRESE	* ENTATIO	TAL OF M	Minus ULTIPLE DEF	PENDENT CLAIM	=	X	39=		OR	X78=	
	11101	Nime	N Oi III.	JLIITLL DL.	PNDENT OFFINE		+1	30=		OR	+260=	
								TOTAL	<del> </del>	- L	TOTAL	<b></b>
			umn 1)		(Column 2)	(Column 3)	ADDI	T. FEE		JON A	ADDIT. FEE	
В	,	CL/	AIMS AINING		HIGHEST NUMBER				ADDI-	ı r		1001
AMENDMENT		AF	TER IDMENT		PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
IND	Total	*		Minus	**	=	X\$	6 9=		OR	X\$18=	
AM	Independent FIRST PRESE	* ENTATIO	N OF MI	Minus	*** PENDENT CLAIM	=	X3	39=	<del></del>	OR	X78=	
	FINOT THESE.	NIAIIC.	N OF WIL	ILIIPLE DEF	ENDENT CLATIVI		+1(	30=		1		
							T-	OTAL		OR	+260= TOTAL	
	<u></u>	(Colu	ımn 1)		(Column 2)	(Column 3)	ADDIT	FEE L		OR A	ADDIT. FEE	
ပ	Service Control	CLA	AIMS AINING	5 J	HIGHEST		_		1001	• г		
AMENDMENT (		AFT	AINING TER DMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA <sup>-</sup>		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FFF
NDN.		*		Minus .	**	=	X\$ :	9=		OR	X\$18=	FEE
AME		*	i	Minus	***	=	X39					
	FIRST PRESE	NTATIO	N OF MU	LTIPLE DEP	PENDENT CLAIM	1		<del>"</del>		OR	X78=	
* #	of the entry in colur	mn 1 is le	es than th	e entry in colu	mn 2, write "0" in colu	,	+13			OR	+260=	
***	If the "Highest Num	mber Prev mber Prev	viously Pai viously Pai	aid For" IN THIS aid For" IN THIS	S SPACE is less than	n 20, enter "20."	ADDIT.			OR AC	TOTAL DDIT. FEE	
Ţ	he "Highest Numb	ber Previ	ously Paid	I For" (Total or	Independent) is the h	highest number for	ound in th	ne appr	opriate box	in colur	mn 1,	